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PTO/SB/21 (07-06)

Approved for use through 09/30/2006. OMB 0651-0031  
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/710,887
Filing Date	08/10/2004
First Named Inventor	Meng-Chi Liou
Art Unit	2871
Examiner Name	CHEN, WEN YING PATTY

8 Attorney Docket Number

CPTP0002USA

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Supplemental Application Data Sheet 2. A copy of Passport of the first inventor
<b>Remarks</b>  Request for transliteration error correction		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	05/02/2007	Reg. No.	41,526

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Krystal Pan	Date	05/02/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 03 2007

PTO/SB/17 (02-07)

Approved for use through 02/28/2007. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2007

 Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)
 **0.00**

<b>Complete if Known</b>	
Application Number	10/710,887
Filing Date	08/10/2004
First Named Inventor	Meng-Chi Liou
Examiner Name	CHEN, WEN YING PATTY
Art Unit	2871
Attorney Docket No.	CPTP0002USA

**METHOD OF PAYMENT** (check all that apply)
 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

 Deposit Account Deposit Account Number: **50-3105** Deposit Account Name: North America Intellectual Property Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |                                                                                                                        |                                                                                   |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below                                                      | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**Fee Description

- Each claim over 20 (including Reissues)  
 Each independent claim over 3 (including Reissues)  
 Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee (\$)</u>

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

<u>Small Entity</u>	<u>Fee (\$)</u>
50	25

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = _____	/ 50	(round up to a whole number)	x _____	= _____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**SUBMITTED BY**

Signature	<i>Winston Hsu</i>	Registration No. (Attorney/Agent)	41,526	Telephone	3027291562
Name (Print/Type)	Winston Hsu			Date	05/02/2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

5 Applicants: Meng-Chi Liou et al.  
Appl. No.: 10/710,887 Filing Date: 08/10/2004  
Examiner: CHEN, WEN YING PATTY Art Unit: 2871  
Docket No.: CPTP0002USA

10 Title: Multi-Domain vertical alignment liquid crystal display panel comprising alternating and parallel slits and projections

To: Commissioner for Patents  
P.O. BOX 1450  
15 Alexandria, VA 22313-1450

Subject: Request for transliteration error correction

20 Dear Sir,

The following is a request for transliteration error correction. Incorrect transliteration of the first inventor's name was made without deceptive intention when filing the above-identified patent application on 08/10/2004.

25 The first inventor's name was incorrectly provided as "Meng-Chi Liu". The applicant hereby requests to correct the first inventor's name as "Meng-Chi Liou". A copy of supplemental application data sheet showing the correction and other related documents are included with this request.

Respectfully submitted,

Winston Hsu

Date: 05/02/2007

Winston Hsu, Patent Agent No. 41,526

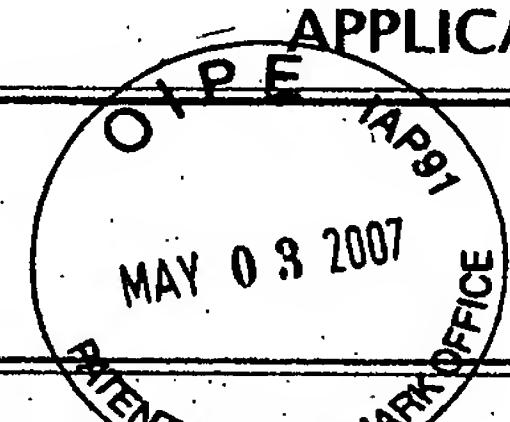
5 P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

Facsimile: 806-498-6673

e-mail : [winstonhsu@naipo.com](mailto:winstonhsu@naipo.com)

10 Note: Please leave a message in my voice mail if you need to talk to me. (The time in D.C. is 12 hours behind the Taiwan time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)



## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of  
Invention

MULTI-DOMAIN VERTICAL ALIGNMENT LIQUID CRYSTAL DISPLAY PANEL

Application Type: regular, utility

Attorney Docket Number: CPTP0002USA

## Correspondence address:

Customer Number: 027765 \*027765\*

## Priority Data:

Doc.No: 093110689; Country - TW; Date: 2004-04-16 us-priority-claimed

## Inventors Information:

## Inventor 1:

Applicant Authority Type: Inventor

Citizenship: TW

Given Name: Meng-Chi

Family Name: Liu Liou

City of Residence: Tao-Yuan Hsien

Country of Residence: TW

Address-1 of Mailing Address: 8F, No. 76, Min-You 5th St., Tao-Yuan City

## Address-2 of Mailing Address:

City of Mailing Address: Tao-Yuan Hsien

State of Mailing Address:

Postal Code of Mailing Address:

Country of Mailing Address: TW

Phone:

Fax:

E-mail:

## Inventor 2:

**Applicant Authority Type:** Inventor  
**Citizenship:** TW  
**Given Name:** Chung-Ge  
**Family Name:** Lin  
**City of Residence:** Tao-Yuan City  
**Country of Residence:** TW  
**Address-1 of Mailing Address:** No. 34, Lane 79, Tao-De Rd.  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Tao-Yuan City  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** TW  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 3:**

**Applicant Authority Type:** Inventor  
**Citizenship:** TW  
**Given Name:** Kuang-Shyang  
**Family Name:** Lin  
**City of Residence:** Tao-Yuan Hsien  
**Country of Residence:** TW  
**Address-1 of Mailing Address:** No. 44, Lane 356, Da-Tong Rd., Guei-Shan Hsiang  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Tao-Yuan Hsien  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** TW  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 4:**

**Applicant Authority Type:** Inventor

<b>Citizenship:</b>	TW
<b>Given Name:</b>	Fu-Yuan
<b>Family Name:</b>	Shiau
<b>City of Residence:</b>	Chia-I City
<b>Country of Residence:</b>	TW
<b>Address-1 of Mailing Address:</b>	No. 61, Chu-Wei Li
<b>Address-2 of Mailing Address:</b>	
<b>City of Mailing Address:</b>	Chia-I City
<b>State of Mailing Address:</b>	
<b>Postal Code of Mailing Address:</b>	
<b>Country of Mailing Address:</b>	TW
<b>Phone:</b>	
<b>Fax:</b>	
<b>E-mail:</b>	

**Attorney Information:****practitioner(s) at Customer Number:**

027765 \*027765\*

as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.



132577884

中華民國外交部部長茲請各國有關機關  
對持用本護照之中華民國國民允予自由  
通行，并請必要時儘量予以協助及保護。

The Minister of Foreign Affairs of the Republic of China  
requests all whom it may concern to permit the national of  
the Republic of China named herein to pass freely and in  
case of need to give all possible aid and protection.

(持照人簽名) (SIGNATURE OF BEARER)

劉夢騏 LIOU MENG-CHI

Office of the Minister of Foreign Affairs

持照人資料 :



姓名 / Name : 刘夢騏 LIOU, MENG-CHI

外交別名 / Alias name : LIOU ERIC

國籍 / Nationality : REPUBLIC OF CHINA

性別 / Sex :

M

發照日期 / Date of issue :

26 OCT 2001

效期截止日期 / Date of expiry :

26 OCT 2011

發照機關 / Authority :

MINISTRY OF FOREIGN AFFAIRS

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07 APR 1974

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